

## **Application Data Sheet**

### **Application Information**

Application number::	
Filing Date::	12/03/03
Application Type::	Regular
Subject Matter::	Utility
Title::	METHODS AND SYSTEMS FOR TREATING THE VASCULATURE WITH ESTROGENS
Attorney Docket Number::	021621-001310US
Request for Early Publication::	No
Request for Non-Publication::	No
Suggested Drawing Figure::	3
Total Drawing Sheets::	7
Small Entity?::	Yes
Petition included?::	No
Secrecy Order in Parent Appl.::	No

### **Applicant Information**

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	JUDITH CAROL
Family Name::	WILBER
City of Residence::	Oakland
State or Province of Residence::	CA
Street of Mailing Address::	967 Hillcroft Circle
City of Mailing Address::	Oakland
State or Province of mailing address::	CA
Postal or Zip Code of mailing address::	94610

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: LYNN MATEEL  
Family Name:: BARR  
City of Residence:: Lafayette  
State or Province of Residence:: CA  
Street of Mailing Address:: 1600 Shangri-La Court  
City of Mailing Address:: Lafayette  
State or Province of mailing address:: CA  
Postal or Zip Code of mailing address:: 94549

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: KIRK PATRICK  
Family Name:: SEWARD  
City of Residence:: Dublin  
State or Province of Residence:: CA  
Street of Mailing Address:: 5289 Gilford Court  
City of Mailing Address:: Dublin  
State or Province of mailing address:: CA  
Postal or Zip Code of mailing address:: 94568

### **Correspondence Information**

Correspondence Customer Number:: 20350

### **Representative Information**

Representative Customer Number:: 20350

**Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	An Appn claiming benefit under 35 USC 119(e) of	60/430,993	12/03/02

**Assignee Information**

Assignee Name::	EndoBionics, INc.
Street of mailing address::	3077 Teagarden Street
City of mailing address::	San Leandro
State or Province of mailing address::	CA
Postal or Zip Code of mailing address::	94577